

CHANGE CONTROL RECORD

Date	Section	Page(s)	Change
03-01-13	2	7,10	Changed references to mental retardation) intellectual disabilities or related disabilities)
03-01-13	4	-	Updated modifiers and units of service throughout document
03-01-13	5	10	Deleted Jasper County PO Box address
03-01-13	Appendix 1	i 2, 38, 70 38, 54, 70	Deleted Change Log Changed edit code description reference to DMR and MR/RD to ID/RD for edit codes 052, 053, 712, and 953 Updated resolutions for edit codes 714, 851, and 953
03-01-13	Managed Care Supplement	7	Deleted the Department of Alcohol and Other Drug Abuse from agencies exempt from prior authorizations
03-01-13	Appendices and Supplement	-	Added a cover page
02-01-13	1	18	Updated URL address for the National Correct Coding Initiative (NCCI)
02-01-13	Forms	-	Revised DHHS Form 254
01-16-13	4	1-2	<ul style="list-style-type: none"> Deleted reference to reimbursement rates Deleted procedure code 90804, Individual Therapy w/Client Added procedure codes for Individual Psychotherapy, face to face
01-11-12	Forms	-	Corrected procedure code for Diagnostic Assessment without medical- initial on Form 254
01-04-13	Forms	-	Corrected procedure codes for Individual Psychotherapy on Form 254
01-01-13	Forms	-	Replaced Form 254 sample
01-01-13	5	7 9	<ul style="list-style-type: none"> Added Chester county Zip+4 code Updated Greenville PO Box address

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Date	Section	Page(s)	Change
01-01-13	Appendix 1	-	Added Change Log for section changes
12-03-12	1	6 7-8 27-32 33-41	<ul style="list-style-type: none"> Updated web addresses for provider information and provider training Revised heading and language to reflect new provider enrollment requirements Updated Program Integrity language (entire section) Revised heading and language for Medicaid Anti-Fraud Provisions/Payment Suspension/Provider Exclusions/Terminations (entire section)
12-03-12	3	6 10 18, 32, 34 22-23	<ul style="list-style-type: none"> Updated National Provider Identifier and Medicaid Provider Number Updated fields 17, 17b to add requirement for referring or ordering provider NPI Updated provider information web addresses Updated Electronic Funds Transfer (EFT)
12-01-12	5	4 11	<ul style="list-style-type: none"> Updated web address for provider information Updated McCormick county office telephone number
12-01-12	Appendix 1	24, 26, 27, 32, 33 19, 27, 40, 44, 45, 47, 49, 50, 55, 56, 57, 59, 60, 61,	<ul style="list-style-type: none"> Updated CARCs for edit codes 538, 552, 555, 561, 562, 563, 636, 637, 690 Updated resolutions for edit codes 402, 561, 562, 563, 721, 722, 748, 749, 752, 753, 769, 791, 795, 852, 853, 856, 860, 884, 887, 892, 897, 925, 926
12-01-12	TPL Supplement	8, 9, 17	Updated web addresses for provider information and provider training
11-01-12	Appendix 2	-	Updated carrier code list
10-05-12	Forms	-	Updated Duplicate Remittance Advice Request Form
10-03-12	2	5	Replaced hyperlink for LIP pre-enrollment orientation

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Date	Section	Page(s)	Change
10-01-12	1	4	Replaced back of Healthy Connections Medicaid card
10-01-12	Appendix 1	-	Updated edit code information through document
08-01-12	1	2, 8, 9, 12, 13, 15, 25, 34	Updated program area contact information to reflect Medicaid Bulletin dated June 29, 2012
08-01-12	2	44	Updated program area contact information to reflect Medicaid Bulletin dated June 29, 2012
08-01-12	3	1, 27, 30, 34 6, 17, 22	<ul style="list-style-type: none"> Updated program area contact information to reflect Medicaid Bulletin dated June 29, 2012 Updated hyperlinks
08-01-12	5	1 5 7	<ul style="list-style-type: none"> Updated program area contact information to reflect Medicaid Bulletin dated June 29, 2012 Removed fax request information for SCDHHS forms Added SCDHHS forms online order information Updated telephone number for Greenville county office
08-01-12	Forms	-	<ul style="list-style-type: none"> Deleted forms 140 and 142 Updated Duplicate Remittance Advice Request Form
08-01-12	Appendix 1	- 1, 24, 60, 65, 66-67, 70-72 15, 31, 69 8, 10, 29, 31 10, 11, 14, 34, 48	<ul style="list-style-type: none"> Updated program area contact information to reflect Medicaid Bulletin dated June 29, 2012 Replaced CARC 141 or CARC A1 for edit codes 52, 053, 517, 600, 924-926, 929, 954, 961, 964, 966, 967, 969, 980, 985-987 Added edit codes 349, 590, 978, 990, 991-995 Deleted edit codes 166, 205, 573, 574, 593, 596 Updated resolution for edit codes 170-172, 171, 174, 210, 321, 711, 798
08-01-12	Managed Care Supplement	1-2 7	<ul style="list-style-type: none"> Changed Division of Care Management to Bureau of Managed Care Updated program area contact information to reflect Medicaid Bulletin dated June 29, 2012

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Date	Section	Page(s)	Change
		11 17 19	<ul style="list-style-type: none"> Removed language limiting enrollment to 2500 members Update contact information for Palmetto Physician Connections Added to "Medicaid" to BlueChoice HealthPlan
08-01-12	TPL Supplement	5, 6, 10,17, 24	Updated program area contact information to reflect Medicaid Bulletin dated June 29, 2012
07-01-12	2	8-12 13-14 16 19-21 3 7 15 42 11 13 13, 14 15 15 -	<ul style="list-style-type: none"> Updated QIO information to reflect Medicaid Bulletin dated May 15, 2012 in the following sections: <ul style="list-style-type: none"> Medical Necessity (entire section) Quality Improvement Organization – Physician Referrals (entire section) Retroactive Coverage Clinical Records and Documentation Requirements (entire section) Updated policy in the following sections: <ul style="list-style-type: none"> Program Requirements Eligibility for Services State Agency Referrals/Prior Authorization (PA) Licensed Independent Social Work- Clinical Practice Supervision Document heading changes: <ul style="list-style-type: none"> "QIO MNS Confirmation" to "MNS Confirmation" "Quality Improvement Organization" to "Quality Improvement Organization – Physician Referrals" Added subheadings "Physicians Responsibilities" and "QIO Responsibilities" "Referral Process/Prior Authorization (PA) – DHHS Form 254" to "State Agency Referrals/Prior Authorization (PA)" Added subheading "DHHS Form 254" Editorial changes throughout document
07-01-12	4	1	<ul style="list-style-type: none"> Updated Procedure Codes Requiring Physician Referral and Prior Authorization to reflect Medicaid Bulletin dated May 15, 2012

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Date	Section	Page(s)	Change
		2	<ul style="list-style-type: none"> Updated Procedure Codes Requiring State Agency Referral
07-01-12	Appendix 1	16, 48 45	<ul style="list-style-type: none"> Deleted edit codes 386 and 868 Added edit codes 837, 838, 839
07-01-12	Appendix 2	-	Updated carrier codes
06-01-12	2	10, 11, 13-16, 19, 20, 26	Updated QIO and 254 Form information
06-01-12	4	All	Updated QIO information and rates
06-01-12	Forms	-	<ul style="list-style-type: none"> Updated the Medical Necessity Statement Updated the LIPS Referral Form Updated the LIPS Authorization Form
05-01-12	Appendix 1	62	Updated edit code 975
04-01-12	1	4	Replaced South Carolina Healthy Connections card
04-01-12	5	11 12	<ul style="list-style-type: none"> Updated address for Marion County Updated phone number for Newberry County
04-01-12	Forms	-	<ul style="list-style-type: none"> Added Form 130 Removed Mental Health form Removed LMSW form
02-07-12	Cover	-	Manual cover updated January 1, 2012
02-07-12	Appendix 1	18 24 30	<ul style="list-style-type: none"> Updated edit code 402 Updated edit code 544 Updated edit code 636, 637, and 642
02-01-12	3	19 22	<ul style="list-style-type: none"> Added a note regarding The Web Tool Updated the Remittance Advice -835 Transaction
02-01-12	5	9	Updated the Fairfield county office number
02-01-12	Appendix 1	18 30	<ul style="list-style-type: none"> Updated edit code 402 Updated edit code 636, 637, and 642

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Date	Section	Page(s)	Change
		42 49	<ul style="list-style-type: none"> Updated edit code 766 Updated edit code 867
01-01-12	1	2-5, 20, 24	Deleted IVRS Information per “Retirement of Toll Free Eligibility Verification Line” bulletin released 11-18-11
01-01-12	2	8, 44	Deleted IVRS Information per “Retirement of Toll Free Eligibility Verification Line” bulletin released 11-18-11
01-01-12	3	- 22	<ul style="list-style-type: none"> Updated hyperlinks throughout section Updated EFT information
01-01-12	5	1	Deleted IVRS Information per “Retirement of Toll Free Eligibility Verification Line” bulletin released 11-18-11
01-01-12	Appendix 1	62 -	<ul style="list-style-type: none"> Deleted IVRS Information per “Retirement of Toll Free Eligibility Verification Line” bulletin released 11-18-11 Updated CARCs and RARCs throughout the document
01-01-12	Managed Care Supplement	9	Deleted IVRS Information per “Retirement of Toll Free Eligibility Verification Line” bulletin released 11-18-11
01-01-12	TPL Supplement	2	Deleted IVRS Information per “Retirement of Toll Free Eligibility Verification Line” bulletin released 11-18-11
11-01-11	1	24	Updated TPL contact information
11-01-11	3	33, 40, 41	Updated TPL contact information
11-01-11	TPL Supplement	6, 15 12 3, 17, 19	<ul style="list-style-type: none"> Changed Medicare timely filing requirement to two years and six months Deleted policy to use Medicaid legacy provider number on the same line as the Medicaid carrier code Deleted sample legacy number from UB-04 TPL Fields table Updated TPL contact information

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Date	Section	Page(s)	Change
10-01-11	Appendix 1	14, 29 47	<ul style="list-style-type: none"> Added edit codes 334 and 584 Updated edit code 845
09-01-11	1	19	Deleted information regarding National Correct Coding Initiative
09-01-11	5	13	Updated zip code for Spartanburg County office
09-01-11	Appendix 1	15, 29, 30	Added edit code 361, 591, 596 and 605
08-01-11	3	-	Updated language throughout section to reflect the current billing policies including claim processing, claim submission, and copayments
08-01-11	Appendix 1	8	Updated edit codes 165 and 166
08-01-11	Appendix 3	1	Updated the copayment schedule per the bulletin effective July 11, 2011
08-01-11	Managed Care Supplement	1, 5	Updated to reflect the new beneficiary copayment requirements in accordance with Public Notice posted July 8, 2011
07-01-11	5	13	Deleted PO Box address for the Spartanburg County Office
07-01-11	Forms	-	<ul style="list-style-type: none"> Updated Authorization Form Added Mental Health Form Added LMSW Registration Form
07-01-11	Appendix 1	12 43 56	<ul style="list-style-type: none"> Updated resolution for edit code 300 Added edit codes 840 and 841 Updated Provider Enrollment Contact information in edit codes 941 and 944
07-01-11	Appendix 3	1	Updated the copayment schedule per the bulletin effective July 8, 2011
06-01-11	5	5	Corrected Abbeville County PO Box Zip+4 Code
06-01-11	Forms	-	Removed Referral Request for Out of State Therapeutic Treatment Services form
05-01-11	1	8, 11	Added language prohibiting payment to institutions

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Date	Section	Page(s)	Change
			or entities located outside of the United States
05-01-11	Appendix 1	43	Updated edit code 796
04-01-11	5	6	Updated telephone number for Beaufort County
04-01-11	Forms	-	Updated Electronic Funds Transfer Form
04-01-11	Appendix 3	-	Updated copay amounts to reflect bulletin dated 3-16-11
03-01-11	1	7, 9	Updated to reflect Medicaid Bulletin dated February 9, 2011 – Provider Service Center
03-01-11	3	18, 22, 23	Updated to reflect Medicaid Bulletin dated February 9, 2011 – Provider Service Center
03-01-11	5	4 5	Updated to reflect Medicaid Bulletin dated February 9, 2011 – Provider Service Center Added toll free number for Aiken County
03-01-11	Appendix 1	- 67	Added SCDHHS Medicaid Provider Service Center (PSC) information at top of each page in header section Made change to Edit Code 990 description
03-01-11	Appendix 2	-	Updated alpha and numeric carrier code lists to reflect Web site update on 12/14/10
03-01-11	TPL Supplement	17 24, 25	<ul style="list-style-type: none"> Changed the name of the Provider Outreach Web site to Provider Enrollment and Education Updated the descriptions for Form130s
02-01-11	Appendix 1	3	Added edit codes 079 and 080
01-01-11	1	7 19-20	<ul style="list-style-type: none"> Updated the South Carolina Medicaid Web-based Claims Submission Tool section Updated to reflect Medicaid Bulletin dated December 8, 2010 – Information on NCCI Edits
01-01-11	3	18, 21, 23, 24	<ul style="list-style-type: none"> Updated electronic remittance package information

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Date	Section	Page(s)	Change
		15, 29	<ul style="list-style-type: none"> Updated to reflect Medicaid Bulletin dated December 10, 2010 – Reporting Patient Liability on Claims
		22	<ul style="list-style-type: none"> Updated to reflect Medicaid Bulletin dated December 10, 2010 – Requests for Duplicate Remittance Package
01-01-11	5	13	Added toll-free telephone number for Saluda county
01-01-11	Forms	-	<ul style="list-style-type: none"> Added the Duplicate Remittance Request Form Updated the LIPS Referral form Updated the LIPS Authorization Form
01-01-11	Appendix 1	9	Added edit codes 165 and 166
01-01-11	TPL Supplement	8, 10 8 10 13 15 15	<ul style="list-style-type: none"> Removed references to Dental claims Removed language to contact program areas for missing carrier codes Added reference to CMS-1500 for correcting edit code 151 on the ECF Added edit code 165 to other TPL-related insurance edit codes list Updated Retro Medicare section to include the following: <ul style="list-style-type: none"> Changed the timely filing requirement from 90 days of the invoice to 30 days Added SCDHHS TPL recovery language Updated the Retro Health and Pay & Chase section
12-01-10	Cover	-	Replaced “Medicaid Provider Manual” with “South Carolina Healthy Connections (Medicaid)”
12-01-10	Appendices	-	Replaced “South Carolina Medicaid” with “South Carolina Healthy Connections (Medicaid)” in the headers
12-01-10	Supplements	-	Replaced “South Carolina Medicaid” with “South Carolina Healthy Connections (Medicaid)” in the headers
11-01-10	Appendix 1	8 16	<ul style="list-style-type: none"> Edit code 202: added information to Resolution section

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Date	Section	Page(s)	Change
		32 51 52	<ul style="list-style-type: none"> Edit codes 421 and 424 deleted Edit code 733 information updated in Resolution section: "Adjust the net charge in field" changed from 26 to 29 Deleted edit code 959 Deleted edit codes 962 and 963
11-01-10	TPL Supplement	3, 8, 13-14, 18-19 6, 15-17	<ul style="list-style-type: none"> Updated to reflect Medicaid Bulletin dated July 8, 2010 – Transfer of the Dental Program Administration to DentaQuest Updated to reflect Medicaid Bulletin dated September 13, 2010 – Changes to the Third Party Liability Medicare Recovery Cycle
10-01-10	1	- 1 7 10	<ul style="list-style-type: none"> Removed all reference to the SCHIP program to reflect Medicaid Bulletin dated August 19, 2010 – Changes to the Healthy Connections Kids (HCK) Program Updated Program Description section Updated the SC Medicaid Web-Based Claims Submission Tool section to reflect Medicaid Bulletin dated July 8, 2010-Transfer of the Dental Program Administration to DentaQuest Updated Freedom of Choice section
10-01-10	5	11	Correct McCormick county office street address
10-01-10	Managed Care Supplement	- 1 2 3 4 5 6 13 17	<ul style="list-style-type: none"> Removed all references to the SCHIP program to reflect Medicaid Bulletin dated August 19, 2010 – Changes to the Healthy Connections Kids (HCK) Program Updated Managed Care Overview Updated Managed Care Organizations and Core Benefits paragraphs Updated MCO Program ID card paragraph Updated MHN Program ID card paragraph Updated Core Benefits Updated Exempt Services Updated Overview Deleted "Medicaid Managed" from "Current Medicaid Managed Care Organizations" heading and following paragraph

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Date	Section	Page(s)	Change
09-01-10	3	19 19-20 36	Updated the following sections to reflect Medicaid Bulletin dated July 8, 2010 – Transfer of the Dental Program Administration to DentaQuest: <ul style="list-style-type: none"> • Companion Guides • South Carolina Medicaid Web-based Claims Submission Tool • Claim-Level Adjustments
09-01-10	5	5 8 11	<ul style="list-style-type: none"> • Removed County Commissioner's Building from the Aiken County address • Deleted Dorchester County physical address telephone number • Removed Highway 28 N from the McCormick County address
09-01-10	Appendix 1	9 -	<ul style="list-style-type: none"> • Added edit code 225 • Removed all references to the ADA Claim in the Resolution column
09-01-10	TPL Supplement	12 13 18	<ul style="list-style-type: none"> • Updated the Dental Paper Claims section to delete paper claims submission instructions and added the DentaQuest contact information • Updated the Web-Submitted Claims section with the exception to Dental claims • Updated the TPL Resources section to include the DentaQuest contact information for TPL questions
08-17-10	Cover	-	Corrected cover date
08-01-10	2	2 3, 4 6 7 8 9 12 14 32	Updated the following sections: <ul style="list-style-type: none"> • Rehabilitative Services Overview • Private Organizations • New Provider Enrollment for Private Organizations • Private Organization Requirements • Reporting Changes • Closure for a RBHS Provider • Contents of the SCDHHS Medical Necessity Statement (MNS) • Medical Necessity • Billable Code/Location of Service

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Date	Section	Page(s)	Change
08-01-10	3	7-8	Updated modifiers
08-01-10	4	1-8	Updated modifiers
08-01-10	5	5, 9, 11-13 6	<ul style="list-style-type: none"> Updated the zip codes for Aiken, Edgefield, McCormick, Newberry, and Saluda counties Updated the address for Barnwell County Updated the telephone number for Beaufort County
08-01-10	Forms	-	<ul style="list-style-type: none"> Updated DHHS Form 254 Corrected signature lines of Medical Necessity Statement for: <ul style="list-style-type: none"> Printed name of Physician and phone # Name of LIP, fax # of LIP, and NPI of referred LIP
08-01-10	Appendix 1	20 51, 52 59	<ul style="list-style-type: none"> Deleted edit code 520 Deleted Provider Enrollment e-mail address from codes 941 and 944 Changed resolution for edit code 994
07-01-10	5	-	Updated telephone numbers and zip codes for multiple county offices
07-01-10	Appendix 1	32 35	<ul style="list-style-type: none"> Updated edit code 714 Updated edit code 738
07-01-10	Appendix 2	21, 22, 25, 63, 89	Changed First Health to Magellan Medicaid Administration